**Facility of telemedicine through satellites**

2501. SHRIMATI VANGA GEETHA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have any proposal to provide facility of telemedicine to urban and rural area through satellites;

(b) if so, the details of such locations and areas identified, so far, especially in Andhra Pradesh;

(c) the expenditure to be incurred thereon;

(d) whether Government are involving public and private partnership for this purpose;

(e) if so, the details thereof; and

(f) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) Yes, Sir. ISRO Telemedicine programme consist of linking remote/rural district hopsitals with Super Speciality hospitals through INSAT/EDUSAT, in areas like Jammu, Kashmir and Ladakh in North near Himalayas, Offshore Islands of Andaman and Lakshadweep, North Eastern States and some of the remote and tribal districts in the main land State of Kerala, Karnataka, Tamil Nadu, Chhattisgarh, Punjab, West Bengal, Orissa, Andhra Pradesh, Rajasthan, etc.

In Andhra Pradesh, Presently 3 hospitals (Arogonda-Chittoor Distt., Sriharikota Hospital and MNJ Institute of Oncology, Hyderabad) have been provided with this facility.

It is planned to cover 5 more hospitals in the coming months under ISRO's Telemedicine network.

(c) The expenditure incurred for the Telemedicine equipment will be the cost of VSATs and Telemedicine hardware and software costing about Rs. 8.0 lakhs per node.

The satellite bandwidth is provided without charge for all the Government and Trust hospitals which undertake to serve the rural popoulation.

The cost of the infrastructure at each hospital is to be borne by the respective hospitals or the State Government. Appromixate cost for infrastructure is about Rs. 5.0 lakhs.

(d) Yes, Sir.

(e) The ISRO's Telemedicine programme has been supported by the major speciality hospitals in the country for providing tele-consultation and treatment to the remote district hospitals. Some of the speciality hospitals and the medical college hospitals which provide tele-consultation are either private or trust hospitals apart from the leading national institutions and Government hospitals thereby establishing a good private public partnership.

(f) Not applicable.

**Sickle Cell Research Centre in Nagpur**

2502. SHRI R.S. GAVAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have any proposal to establish Sickle Cell Research Centre in Nagpur;

(b) if so, the details thereof; and

(c) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) The Indian Council of Medical Research under Ministry of Health and Family Welfare has conducted a multicentric study on primitive tribal population with Nagpur and Pune as centres from Maharashtra State. Under this project a simple intervention method to reduce the sickle cell crisis in the affected individuals, were developed which included folic acid and Fersolate tablets to be given to cases of nutritional anemia and Sickle Cell Disease (SCD) with iron deficiency. Sickle cell anemia patients have been advised to take electrol powder and plenty of fluid during the evasoocclusive crisis. An improvement in Hb level has been observed in those cases who are taking the tablets regularly. Hepatitis B, H. influenzae and pneumococus vaccines were given to sickle cell anemia cases in Nagpur. Genetic counselling has been offered to the affected population. State Government has been requested to takeover intervention module developed under this programme. Apart from this, a number of other districts in Maharashtra have been studied by Council's Institute of Immunohaematology, Mumbai for screening of sickle cell anemia.

**Parallel market of spurious drugs**

†2503. SHRI MANGANI LAL MANDAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that a parallel system is in place for manufacturing and marketing of spurious drugs in the country;

† Original notice of the question was received in Hindi.